

Use of this form is limited to reports of property crime without a known suspect or evidence.

Lancaster Bureau of Police Citizen Crime Report

Assignment #:
Today's Date:/ Current Time:AM \[PM \]
<u>PLEASE PRINT</u> Your Information:
Last Name: Middle Initial:
Street Address: Apt:
City: State: Zip:
Phone #: Home () Work () Mobile () Other ()
E-mail Address:
Sex: Male Female Race:
Victim's Age Date of Birth/ Occupation
Name of Business (if applicable):
Street Address: Apt
City:
Location / AddressWhere Crime Occurred:
Date Crime Occurred:/ Time Crime Occurred:AM _PM OR
Date/Time Period Crime Occurred: Between/ and/ Between
Status/Condition of Property: Stolen Damaged Damaged Description of Stolen/Damaged Property
Value of Property: \$ Make Model Serial Number
Vehicle Information:
Vehicle Information: Make:
Make: Model: Year:

PLEASE READ WARNING BELOW!

False Reports to Law Enforcement Authorities ***********************************
Please be advised that it is against the law to knowingly give false information or file a false report to law enforcement authorities and the Lancaster Bureau of Police will prosecute for these crimes. ***********************************
Description of What Occurred: (Please attach additional pages if needed)
Signature of citizen/person completing this report
FOR OFFICIAL USE ONLY:
ASSIGNMENT NUMBER:
UCR CODE:
OFFICER RECIEVING REPORT:
DATE & TIME ENTERED INTO DAILY BULLETIN:/ hrs.
ENTERED BY:
DATE & TIME ENTERED INTO PAPERLESS REPORTING:/ hrs.
ENTERED BY:
NCIC ENTRYYesNo
NCIC ENTRY BY: DATE:/